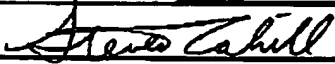


PTO/5B/17 (12-04)

Fee
Only

| | | | |
|---|--|---|--|
| Effective on 12/08/2004. Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4912). FEE TRANSMITTAL For FY 2005 | | Complete if Known | |
| <input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27 | | Application Number 10/668,447 | Filing Date September 22, 2003 |
| TOTAL AMOUNT OF PAYMENT (S) 500 | | First Named Inventor Pedersen, Bruce | Examiner Name Timothy P. Callahan |
| | | Art Unit 2816 | Attorney Docket No. 015114-064000US |

| | | | |
|---|--|---|--|
| METHOD OF PAYMENT (check all that apply) | | | |
| <input type="checkbox"/> Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Money Order <input type="checkbox"/> None <input type="checkbox"/> Other (please identify): _____ | | | |
| <input checked="" type="checkbox"/> Deposit Account Deposit Account Number: 20-1430 Deposit Account Name: Townsend and Townsend and Crew LLP | | | |
| For the above-identified deposit account, the Director is hereby authorized to: (check all that apply) | | | |
| <input checked="" type="checkbox"/> Charge fee(s) indicated below | | <input type="checkbox"/> Charge fee(s) indicated below, except for the filing fee | |
| <input checked="" type="checkbox"/> Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17 | | <input checked="" type="checkbox"/> Credit any overpayments | |
| WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-3038 | | | |
| FEE CALCULATION | | | |
| 1. BASIC FILING, SEARCH, AND EXAMINATION FEES | | | |
| FILING FEES Small Entity Application Type Fee (\$) Fee (\$) | SEARCH FEES Small Entity Fee (\$) Fee (\$) | EXAMINATION FEES Small Entity Fee (\$) Fee (\$) | Fees Paid (\$) |
| Utility | 300 150 | 500 250 | 200 100 |
| Design | 200 100 | 100 50 | 130 65 |
| Plant | 200 100 | 300 150 | 160 80 |
| Reissue | 300 150 | 500 250 | 600 300 |
| Provisional | 200 100 | 0 0 | 0 0 |
| 2. EXCESS CLAIM FEES | | | |
| Fee Description | | | Small Entity Fee (\$) Fee (\$) |
| Each claim over 20 or, for Reissues, each claim over 20 and more than in the original patent | | | 50 25 |
| Each independent claim over 3 or, for Reissues, each independent claim more than in the original patent | | | 200 100 |
| Multiple dependent claims | | | 360 180 |
| Total Claims 24 -20 or HP = 2 x \$50 = \$100 | Extra Claims 2 x \$50 = \$100 | Multiple Dependent Claims Fee (\$) Fee Paid (\$) | |
| HP = Highest number of total claims paid for, if greater than 20 | | | |
| Indep. Claims 5 -3 or HP = 2 x \$200 = \$400 | Extra Claims 2 x \$200 = \$400 | | |
| HP = Highest number of independent claims paid for, if greater than 3 | | | |
| 3. APPLICATION SIZE FEE | | | |
| If the specification and drawings exceed 100 sheets of paper, the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s). | | | |
| Total Sheets - 100 = _____ / 50 = _____ (round up to a whole number) x _____ = _____ | Extra Sheets _____ / 50 = _____ (round up to a whole number) x _____ = _____ | Number of each additional 50 or fraction thereof _____ x _____ = _____ | Fees Paid (\$) |
| 4. OTHER FEE(S) | | | |
| Non-English Specification, \$130 fee (no small entity discount) | | | Fees Paid (\$) |
| Other: _____ | | | |

| | | | |
|--|---|------------------------|--|
| SUBMITTED BY | | | |
| Signature  | Registration No. (Attorney/Agent) 44,578 | Telephone 650-326-2400 | |
| Name (Print/Type) Steven Cahill | | Date March 17, 2005 | |

80448727 v1

03/23/2005 ASHITH 00000001 201430 10668447

01 FC:1201 400.00 DA

02 FC:1202 100.00 DA

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

| PATENT APPLICATION FEE DETERMINATION RECORD | | | | | | Application or Docket Number 10/65847 | | | |
|---|---|--------------|------------------------------------|---------------|-----|---|----------------|-------------------------------|----------------|
| Substitute for Form PTO-875 | | | | | | | | | |
| CLAIMS AS FILED – PART I | | | | | | | | | |
| (Column 1) | | (Column 2) | | SMALL ENTITY | | OR OTHER THAN SMALL ENTITY | | | |
| FOR | NUMBER FILED | NUMBER EXTRA | | RATE | FEE | RATE | FEE | | |
| BASIC FEE (37 CFR 1.16(a)) | | | | | \$ | | \$ | | |
| TOTAL CLAIMS (37 CFR 1.16(c)) | minus 20 = * | | | X \$ | = | X \$ | = | | |
| INDEPENDENT CLAIMS (37 CFR 1.16(b)) | minus 3 = * | | | X \$ | = | X \$ | = | | |
| MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(d)) | | | | + | \$ | + | \$ | | |
| | | | | TOTAL | | TOTAL | | | |
| * If the difference in column 1 is less than zero, enter "0" in column 2. | | | | | | | | | |
| CLAIMS AS AMENDED – PART II | | | | | | | | | |
| (Column 1) | | (Column 2) | | (Column 3) | | SMALL ENTITY | | OR OTHER THAN SMALL ENTITY | |
| AMENDMENT A | CLAIMS REMAINING AFTER AMENDMENT | | HIGHEST NUMBER PREVIOUSLY PAID FOR | PRESENT EXTRA | | RATE | ADDITIONAL FEE | RATE | ADDITIONAL FEE |
| | Total (37 CFR 1.16(c)) | 24 | Minus | 22 | = 2 | X \$ | 25 = | X \$ | 50 = 100.00 |
| | Independent (37 CFR 1.16(b)) | 5 | Minus | 3 | = 2 | X \$ | 100 = | X \$ | 200 = 400.00 |
| | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d)) | | | | | + | \$ | + | \$ |
| | | | | | | TOTAL ADD'L FEE | | TOTAL ADD'L FEE | 500.00 |
| AMENDMENT B | CLAIMS REMAINING AFTER AMENDMENT | | HIGHEST NUMBER PREVIOUSLY PAID FOR | PRESENT EXTRA | | RATE | ADDITIONAL FEE | RATE | ADDITIONAL FEE |
| | Total (37 CFR 1.16(c)) | | Minus | | = | X \$ | = | X \$ | = |
| | Independent (37 CFR 1.16(b)) | | Minus | | = | X \$ | = | X \$ | = |
| | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d)) | | | | | + | \$ | + | \$ |
| | | | | | | TOTAL ADD'L FEE | | TOTAL ADD'L FEE | |
| AMENDMENT C | CLAIMS REMAINING AFTER AMENDMENT | | HIGHEST NUMBER PREVIOUSLY PAID FOR | PRESENT EXTRA | | RATE | ADDITIONAL FEE | RATE | ADDITIONAL FEE |
| | Total (37 CFR 1.16(c)) | | Minus | | = | X \$ | = | X \$ | = |
| | Independent (37 CFR 1.16(b)) | | Minus | | = | X \$ | = | X \$ | = |
| | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d)) | | | | | + | \$ | + | \$ |
| | | | | | | TOTAL ADD'L FEE | | TOTAL ADD'L FEE | |

* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.
 ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20".
 *** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3".
 The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

This collection of information is required by 37 CFR 1.16. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.